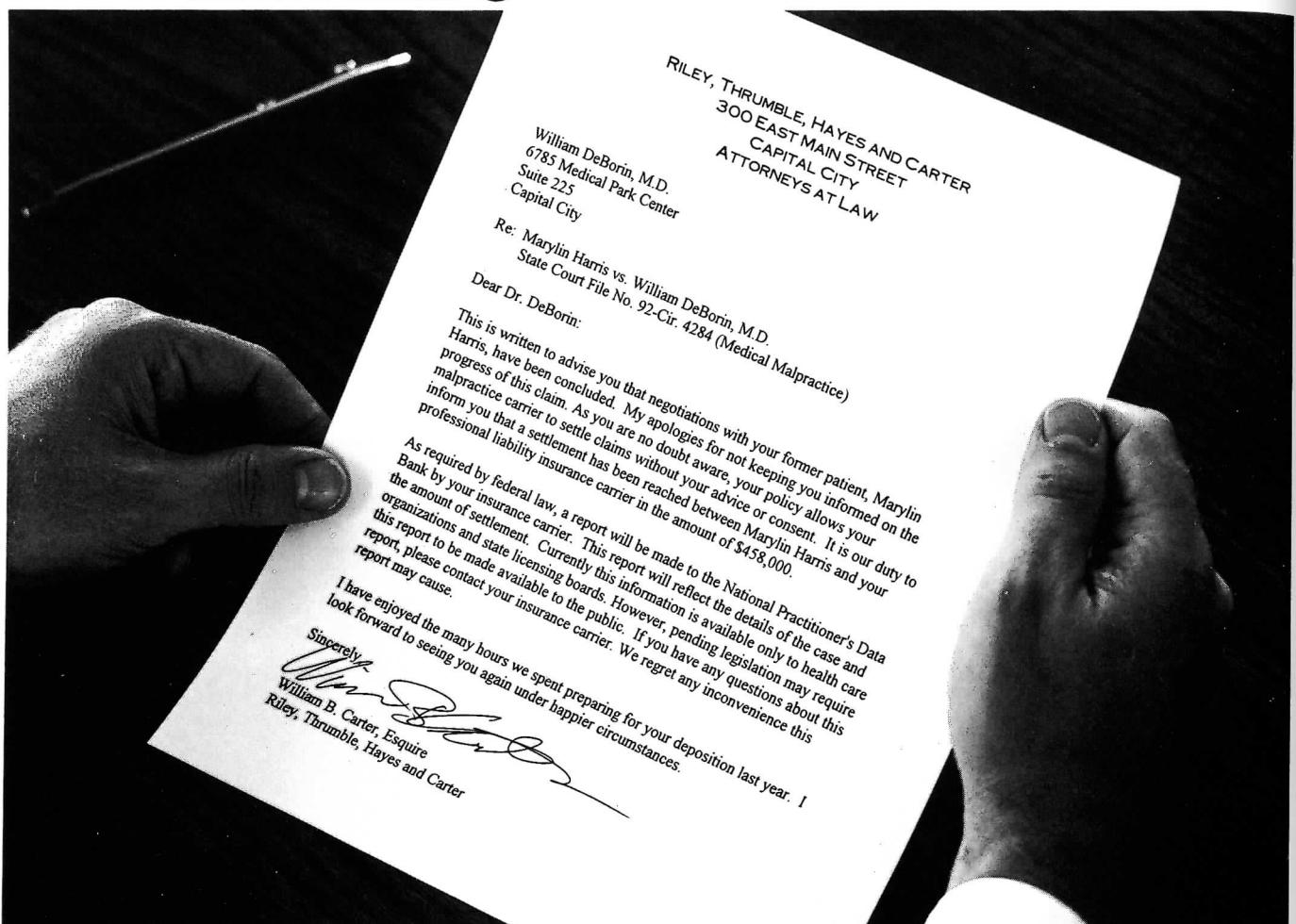


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Herb Alert

DO YOU KNOW WHAT MEDICATION YOUR PATIENT IS TAKING? OF COURSE YOU DO! OR DO YOU? EACH CHART HAS A LIST of current medications prescribed by you, including dosage and usage instructions. But what about prescriptions from other physicians...or Over-The-Counter medications...or "natural" or herbal remedies? Chances are your patients have at least *considered* taking one of these OTC or natural remedies, if they aren't taking them already.

We routinely use supplements in traditional medicine, including Vitamin E for fibrocystic breasts, niacin to reduce cholesterol, co-enzyme Q for heart disease and, of course, Vitamin C to ward off the common cold. However, many of the "natural" remedies available are not tested by the FDA. There is no certainty of their content, and little proof of the validity of their claims. If you look closely at the label, you'll often find a disclaimer in fine print.

The lay public and insurance companies alike are looking to non-traditional ways of improving health care, reducing side effects and, of course, ways of reducing health care costs. My feeling is that if we, as physicians, are not proactive and aware of the pros and cons of the alternative or complementary methods available to our patients, we cannot help them to make decisions about their health care.

The following are some common remedies and the conditions for which they are commonly used:

St. John's Wort is an herbal treatment for

Denise Bobovnyik, MD



A handwritten signature in black ink, appearing to read "Denise J. Bobovnyik".

depression that is found in a shrubby perennial plant. It is the number one anti-depressant prescribed in Germany. It seems to improve mood and sleep quality. In mild cases of depression it is probably beneficial, but like traditional anti-depressants must be used for at least four weeks to obtain its effects. Its mechanism of action is unknown, but may be a weak MAO inhibitor. People should also beware of photo-sensitivity when taking this herb.

Echinacea is a beautiful purple flowering plant. It is used to help reduce cold and flu symptoms. It may stimulate phagocytes, but over the long term may cause immuno-suppression. It should not be used with an immuno-suppressing illness such as lupus.

Ginkgo Biloba has vasodilatory properties used to increase peripheral blood flow. It is also a selective antagonist of platelet aggregation and has been reported to cause spontaneous bleeding from the iris when used with aspirin. Patients believe it will improve their mental capacity and prevent Alzheimer's disease.

Feverfew is used to decrease fever and as a headache remedy. It inhibits release of serotonin and prostaglandins, decreasing inflammation and blood-vessel spasm. It is to be used preventively over time and often used as a migraine remedy. Patients need to watch for interactions between it and NSAIDS.

Saw palmetto is a fruit (berry) extract commonly advertised for prostate problems. It appears to affect testosterone uptake and availability. It is probably safe and has been shown to provide symptomatic improvement in symptoms of mild to moderate BPH. If it works, however, the patient may not complain of symptoms; so if you don't ask, you may miss an underlying problem.

Kava-kava is touted as an anxiolytic. Historically, it has had ceremonial use in the South Sea Islands. It is a CNS depressant similar to benzodiazepines and can have addictive potential. It can potentiate ETOH and other CNS depressants.

Ma-huang is ephedrine and has been known to cause death. It is typically used to increase energy or for weight loss. It can cause HTN, CNS stimulation and palpitations.

continued on page 23

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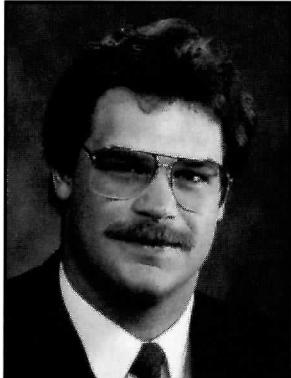
The New Nursing Home: It's not just for your Grandparents Anymore

OVER THE PAST FEW YEARS OF MY PRACTICE IN PHYSICAL MEDICINE AND REHABILITATION I HAVE SEEN A dramatic change in the utilization of the extended-care facilities in our area. When I first moved back to town some five years ago and began my practice I approached the local hospitals about doing a sub-acute rehabilitation unit out of some skilled nursing beds. They thought I was a nutcase.

Now every nursing facility under the sun claims to have a sub-acute rehabilitation program, as do the local hospitals. (Remember, just because you have physical therapy doesn't mean you have a rehabilitation program.) The nursing home business has changed dramatically over the last few years with the decrease in the length of stay on the acute medical floors. Patients are being transferred sooner, and with more risk of medical instability, to nursing facilities.

The facilities have had to adapt to this changing population. They did this by increasing the competence of their nursing care and developing specialized programs for their patients. The nursing homes of today are turning into the general medical floors of tomorrow. Of course, the vast majority of these changes are also being fueled by managed care. Since I have been fielding boatloads of questions on sub-acute rehabilitation, I will try to answer a few.

Ronald M. Yarab, Jr., MD



Ronald M. Yarab, Jr., MD

What is sub-acute care? (Since only a few in this town seem to know.) Sub-acute care fills the gap between acute and long-term care. The formal definition goes something like this:

A separate and distinct program that is goal oriented, comprehensive inpatient care designed for an individual who has had an acute illness, injury, or exacerbation of a disease process.

It is delivered immediately after or instead of acute care. Patients in sub-acute settings do not require the intensity of diagnostic services and invasive procedures commonly provided in acute care. Sub-acute care is a two-billion-dollar-a-year business and growing.

The main adaptation to the skilled nursing facility has been the sub-acute rehabilitation program. These units are basically designed to take the uncomplicated rehabilitation patient (total hip or knee replacement, stroke, uncomplicated multi-trauma patients and deconditioned patients). The key to these programs is to make sure that they are physician-driven and there are outcome measures in place.

Physical, occupational, and speech therapists do not constitute a sub-acute rehabilitation program. There also need to be certified rehabilitation nurses, a qualified medical director, and a whole cast of other characters. The current problem with sub-acute rehabilitation is that it is federally unregulated and unlicensed, so there are as many definitions of sub-acute rehabilitation as there are facilities. You need to research your facilities before sending your patients or family members to them. Questions to ask about any sub-acute program include:

- 1) Does it have CARF (the JCAHO of rehab hospitals) accreditation?
- 2) What is the background/credentials of the medical director?
- 3) Where do most patients go after D/C? (the correct answer is "home")
- 4) What outcome measures are used?
- 5) What is the patient-RN ratio?
- 6) How long has the program been in exist-

continued on page 8

AMA Celebrates Women In Medicine

THE AMERICAN MEDICAL ASSOCIATION WILL OBSERVE WOMEN IN MEDICINE MONTH THIS SEPTEMBER BY CELEBRATING the contributions women have made and continue to make to American medicine. The AMA also celebrates its new Women Physicians Congress (WPC), a group formed to increase the influence and participation of women in the AMA.

"We are truly building on our strengths," said Nancy W. Dickey, M.D., the first woman to be president of the AMA. "More and more women are entering medicine than ever before. In only a few years, patients will be just as likely to see a Martha Welby as a Marcus Welby."

The number of women physicians continues to show steady increase since 1980, when just over 11 percent of physicians were women. In 1996, women accounted for 22 percent of the

total physician population, and they represented more than 35 percent of all residents/fellows and 42 percent of all medical students. At the end of 1996, there were more than 157,000 women physicians.

Women comprise the AMA's fastest growing membership segment and are represented at every level from student to leadership. The Women Physicians Congress, established in 1997 and formally launched last fall with the appointment of its first Governing committee, is a grass roots forum for debate, support, mentoring and input into AMA policy and programming decisions on important women's health and professional issues. Membership in the Women Physicians Congress is open to all physicians interested in women and medicine issues.

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OSMA Update

THE OHIO STATE MEDICAL ASSOCIATION VOTED TO KEEP MEMBERSHIP BETWEEN THE COUNTY MEDICAL SOCIETIES AND the OSMA linked, despite a recommendation from Council and the Task Force 2000 that called for an independent membership structure. This decision was reached at the OSMA's Annual Meeting held in the Spring.

In other business, Dr. Lance Talmage of Toledo was installed as OSMA president. Other officers named included former Sixth District Councilor Dr. David Utlak, Stark County, as president-elect. Dr. Utlak ran unopposed for the position and was elected by acclamation. The

newly-elected Sixth District Councilor is Dr. Chris Knight, immediate past president of the MCMS. The Sixth District includes Mahoning, Trumbull, Columbiana, and Stark Counties.

From the Desk of the Editor

continued from pg. 6

ence?

The other area in sub-acute care that is growing is the medical sub-acute programs, which include patients with the following needs: medically complex, surgery recovery, cardiac recovery, pulmonary management, diabetes and renal disorders. These patients typically receive intensive nursing care roughly 5-8 hours a day, as well as daily physical, occupational, and speech therapy services. Some more progressive facilities have ventilator units and hemodialysis on site. Many facilities are also combining the sub-acute medical and rehabilitation populations.

As you can see, these "nursing homes" are turning into general medical floors. In the future I can see hospitals acting as giant ERs, ICUs, and CCUs until the patient is stabilized, then he/she will be transferred to a nursing facility for convalescent care and rehabilitation needs.

I know the question that you are going to ask next. What about acute rehabilitation units? The reimbursement dollar has significantly de-

creased for these expensive units, and in the future will be used exclusively for spinal cord injury, traumatic brain injury, neuromuscular diseases, and medically unstable CVA and cardiac patients (basically ICU rehab). I have a feeling that they will also become more regionalized in nature.

Sub-acute has come a long way in the last five years and is still evolving. The one thing that can put the kibosh on sub-acute is the upcoming changes in reimbursement. ECFs are switching over to a PPS system, which will force them to take a very medically-stable patient. The facility (not insurance or Medicare) must pay for expensive medical work-ups in the facility and transportation to and from doctor appointments. (That is a whole other article.) So it is easy to see why these facilities are not the "rest homes" of old. The extended care facilities are turning into an integral part of the healthcare delivery system in the United States and will continue to evolve to meet the changing needs of our aging population.



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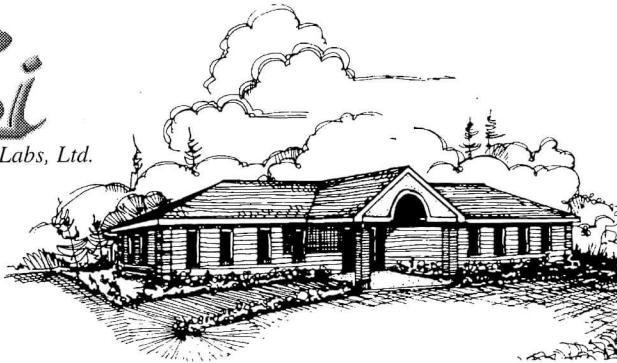
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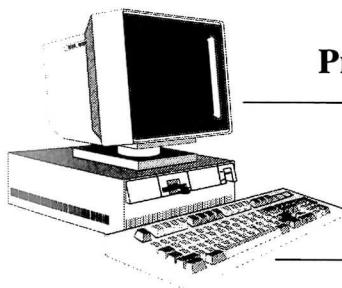
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U.S. Surgeon General Gives Keynote Address at NEOUCOM 25th Anniversary Event

U.S. SURGEON GENERAL AND ASSISTANT SECRETARY FOR HEALTH DAVID SATCHER, M.D., PH.D., WAS THE KEYNOTE SPEAKER AND HONORARY DEGREE RECIPIENT AT A SPECIAL 25TH ANNIVERSARY CONVOCATION AND WHITE COAT CEREMONY OF THE NORTHEASTERN OHIO UNIVERSITIES COLLEGE OF MEDICINE HELD AUGUST 26 ON THE COLLEGE'S FRONT LAWN.

The event included the official opening of the 1998-99 academic year and the symbolic presentation of white coats to 107 second-year medical students beginning their clinical training. It also featured the College of Medicine's first Distinguished Alumni Award, which was presented to Patrick G. Gallagher, M.D., a 1985 NEOUCOM graduate, respected clinical researcher and neonatologist at Yale-New Haven Hospital.

Satcher was awarded the honorary degree, Doctor of Science, Honoris Causa, for his "life-long dedication to improving the health and well-being of all the people and communities of our nation," according to Robert S. Blacklow, M.D., NEOUCOM president and dean.

Satcher's keynote address focused on the value of community-based medical schools like NEOUCOM and their status as role models for other institutions, as well as on his evolving priorities as Surgeon General. These priorities include a healthy start for every child; personal responsibility for health, including physical activity, good nutrition, responsible sexual behavior and avoidance of toxins; mental health, including suicide prevention; and emerging infections and global health. He also discussed the U.S. Department of Health and Human Services' initiative on race and health disparities.

"Humanism in Medicine" was the theme of the White Coat Ceremony, a special event for second-year medical students signifying their induction into the clinical portion of their medical education. The white coat represents to society that the person wearing it is not only competent, but also compassionate in his/her care of patients. The members of the class of 2001

were honored to shake hands with the highest ranking medical officer in the nation, the U.S. Surgeon General, during the ceremony.

The White Coat Ceremony is sponsored by NEOUCOM's office of professional development and the Arnold P. Gold Foundation, a public, not-for-profit organization that develops and supports programs to foster humanism in medicine.

Gallagher was presented his award by Blacklow and Buel Smith, M.D., professor and chairman emeritus of orthopaedic surgery and chairman of the Distinguished Alumni Award Committee. A Columbus native, Gallagher received a B.S. from the College of Biological Sciences at The Ohio State University before earning his M.D. from NEOUCOM. After completing a pediatric residency at Children's Hospital Medical Center in Cincinnati, Gallagher performed a fellowship in neonatal-perinatal medicine at Yale University School of Medicine, where he currently serves as an assistant professor in the department of pediatrics. Gallagher has received funding from several agencies, including the National Institutes of Health, for his research on inherited disorders of the red blood cell. He has a particular interest in genetic disorders of the red cell that cause severe anemia in the fetus and newborn. Gallagher has worked closely at Yale with Bernard Forget, M.D., world-renowned physician recognized for his study of inherited blood disorders.

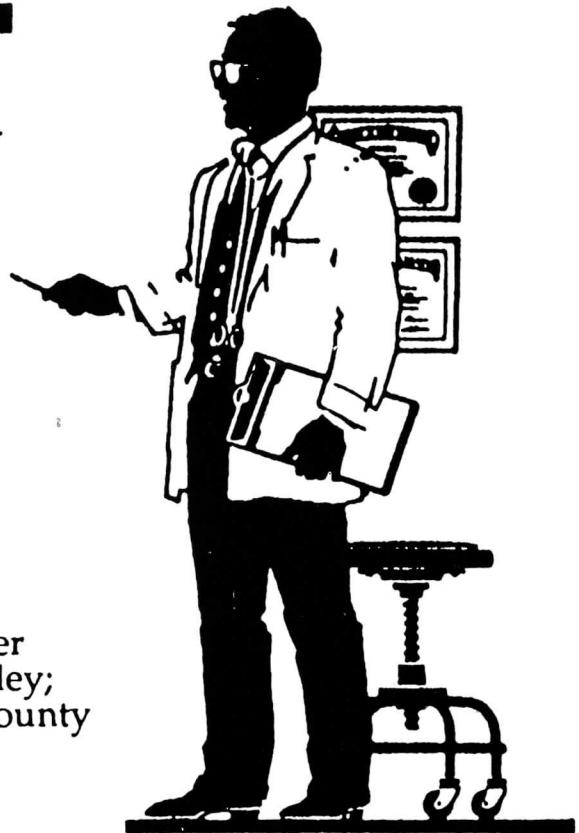
In presenting the award to Gallagher, Smith said, "Equally important (as his research), he is recognized as a very compassionate physician. His high level of compassion was evident early in his medical training: he won the St. Elizabeth (Health Center, Youngstown) award for knowledgeable and compassionate care while a student at the College of Medicine."

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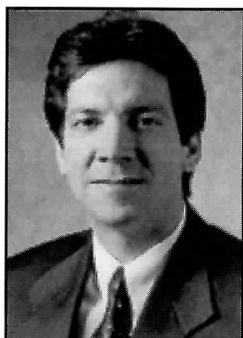
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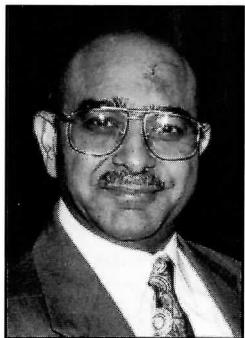
Dr. Michael Miladore was elected as chairman of NEOUCOM's board of trustees. He is the first NEOUCOM graduate to fill this position.



Dr. Michael Miladore

in 1992; he was elected vice chairman in 1996.

Dr. Hira L. Khanna was one of ten area men selected by the YWCA of Youngstown for its 1998 Men of the Year recognition.



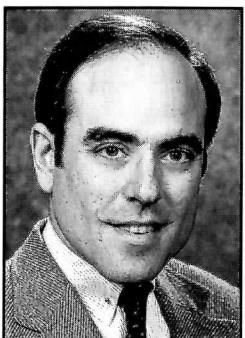
Dr. Hira L. Khanna

Recipients of the honor are chosen for their commitments and contributions to the community through business, religious and community service, medicine, arts, labor and education.

The OSMA has produced a handbook that provides guidance on treating a variety of chronic pain situations.

The handbook will be sent to all Ohio physicians at no charge. CME credit is available for physicians who complete the handbook.

Dr. Eric M.



Dr. Eric M. Chevlen

Chevlen was one of four contributing writer. Dr. Robert Gillette edited the handbook.



Dr. Robert Gillette

Mahoning County Medical Society was presented with a plaque in appreciation of its financial support for the Ohio Physicians Effectiveness Program (OPEP). Eleanor Pershing accepted the award on behalf of the Society during OPEP's first Annual Meeting.

An Open Letter from the Sixth District Councilor

I WOULD LIKE TO BEGIN BY EXPRESSING MY THANKS TO ALL OF THE DELEGATES AND ALTERNATE DELEGATES WHO NOMINATED me for the 6th District Councilor, and to the House of Delegates for electing me to this position. I certainly have great role models to follow in Drs. Robert Reed and David Utlak. I have known David, our OSMA president-elect, for almost 20 years, and am not surprised that he has risen to this position. When we were at OSU, David's social awareness was much keener than the other house officers. We were just trying to become the best physicians we could be and to take good care of our patients. While David was doing the same, he was also much more aware of the outside world. I have all the confidence in the world that David will lead us well, as all of our recent presidents have.

Over the last several years I have seen a great change in the 6th District. We are no longer just looking at what is best for ourselves or our individual counties; now we are looking for what is best for the 6th District and for the OSMA.

That is not to say that there is no spirited debate about the issues, but we have learned the

art of compromise. We are also blessed with very talented and hard-working individuals. This is evidenced by the AMA delegation from the 6th District, which includes David Utlak as delegate, with Drs. Jim Sudimak, Dan Handel, and Andy Lau as alternate delegates. Dan Handel is the chairman of OMPAC. Dr. Charles Smith is our representative on OMPAC. Dr. Tom Detesco served us on the Managed Care Task Force and is a member of OMSS. The 6th District is also blessed with our senior advisors: Drs. Robert Reed, John Vlad, and Robert Taylor.

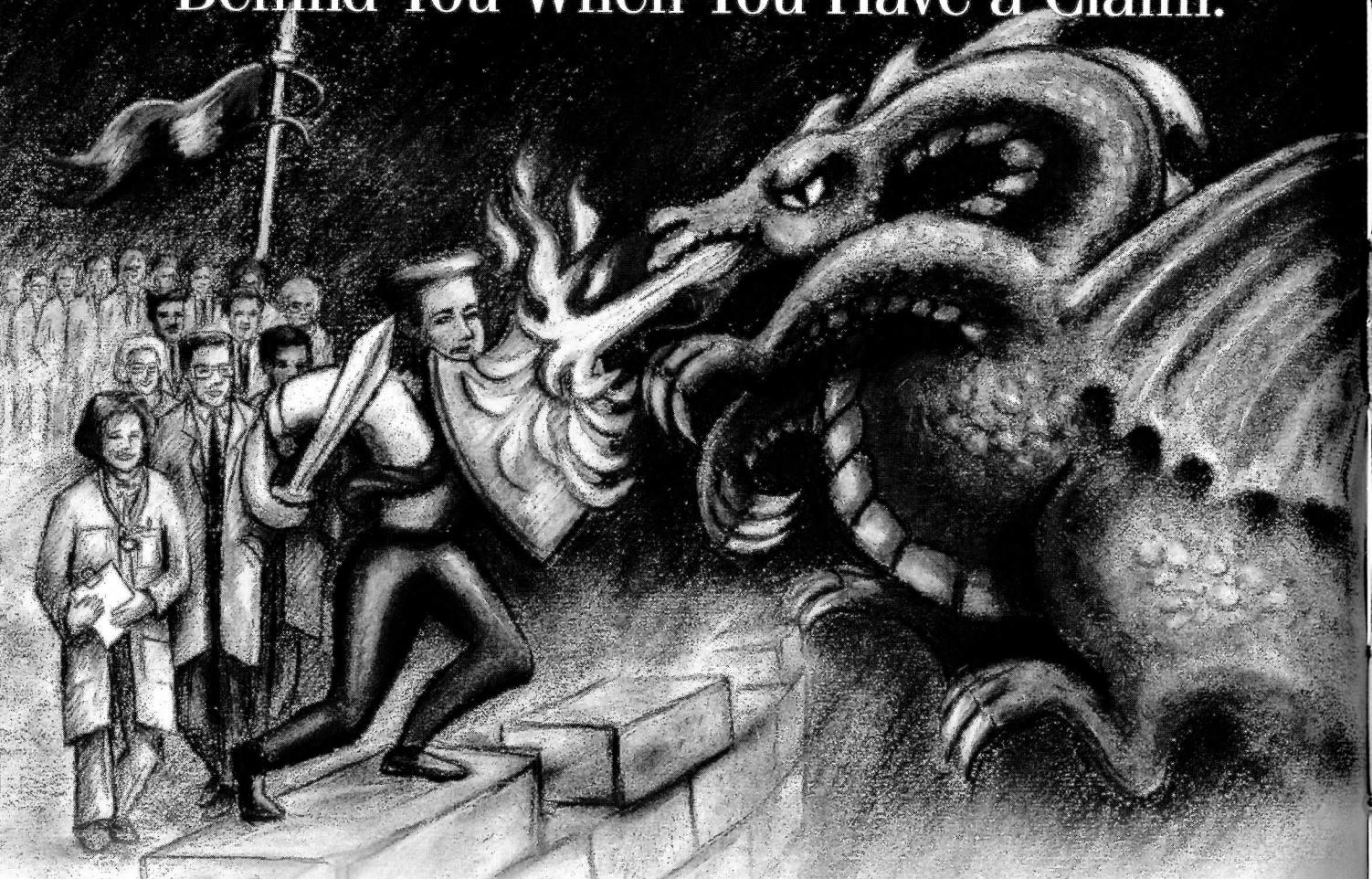
As councilor, I am here to hear your complaints, problems, and advice. I assure you that I will inform the Council of these issues. I look forward to seeing you in the coming year to discuss any issues with you.

Chris A. Knight, MD



Chris A. Knight

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A Look Back...

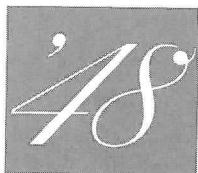
Sixty Years Ago Summer 1938

The Medical-Dental Bureau and the Medical Secretaries Society held a joint dinner at the Southern Hills Country Club. The Medical-Dental Ensemble (a group of MDs and dentists) provided the music. A skit called "Good Night Nurse" performed by doctors' wives and nurses brought down the house. That year saw the completion of the "new" East Wing at the South Side Hospital. Writers complained of the difficulty of getting from the South Side Unit to St. Elizabeth Hospital because of the bottleneck at Spring Common. An article in *Fortune Magazine* indicated that Youngstown was finished as a steel center.



Fifty Years Ago Summer 1948

President John Noll reminded the members that "the practicing physician has a great responsibility to give some of his time, energy, and experience" in teaching the art and science of medicine. The OSMA urged the members to protect the passage of HR 6274 known as the "Doctor's Draft". On June 4th, 1948 the British Government took over the private practice of medicine in England and Wales and established National Health Care. Milton Yarmy gave a talk on the "care of Diabetes."



Forty Years Ago Summer 1958

President Andrew Detesco proposed the formation of a committee on Admissions, Conduct and Discharges to check on overuse and abuse of prepaid medical care in our hospitals. He also



had advice for members on how to conduct themselves in court, and suggested that they take better care of their own health. L.H. Getty was hospitalized with a coronary thrombosis; J. Clair Vance was under treatment at the Mayo Clinic; and T. Golden and Ivan Smith were on the sick list. A.V. Whittaker opened his office in Poland, and Howard Rempes was chosen to be the Society's first full-time executive secretary.

Thirty Years Ago

Summer 1968

Two physicians, William R. Smith and William P. Young, passed away



within two days of each other; both were 71. Arthur V. Whittaker returned from special training in Cardiovascular Medicine at the University of Pittsburgh to join James Calvin as the Assistant Director of the Cardiovascular Laboratory at the North Unit of the Youngstown Hospital Association. New members at that time were Ikuo Maeda and Ronald Roth.

Twenty Years Ago

Summer 1978

Michael Vuksta was presented with the Outstanding Team Physician



Award for many years of dedication to Sports Medicine. The presentation was made in Canton, Ohio, by Society president George Dietz. John Stotler, the first physician named to the Youngstown Board of Health, died at the age of 62. He had served as team physician for YSU and as Chief of staff of St. Elizabeth Hospital. Bernard Schneider, also age 62, died after a long illness. He had been a captain in the U.S. Air Force from 1942 to 1946, and was team doctor for Hubbard High School for many

years. New members at that time were: Sheldon Binder, S.N. Habib, Edward L. McIver, Fred R. Pruitt, Ernesto F. Sabado, G.D. Sangvai, and J.V. Chaves.

Ten Years Ago

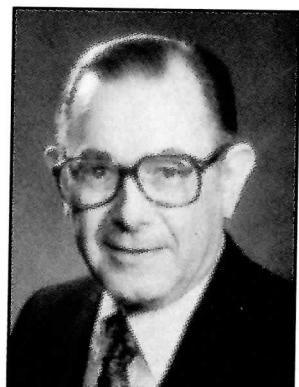
Summer 1988

Mrs. Eleanor Pershing became the new executive director on April 1, 1988, and



breathed new life into the position. She moved the Society office into a more accessible location and gave the *Bulletin* a face-lift and a more modern look. C. Edward Pichette was presented a plaque honoring him for his outstanding and dedicated service as 6th District councilor. J.J. Anderson, 6th District director was being considered for the office of president-elect of the Ohio State Medical Association for 1989. The following members were lost through death: Leon Bernstein (age 80), Alfred Cukerbaum (age 81), and Bernard Taylor (age 71).

Robert R. Fisher, MD



Robert R. Fisher, MD

“Sentimental Journey”

Watercolor, 24” x 24”

THE WATERCOLOR PAINTINGS OF MARY KAY BUCKLEY D'ISA HAVE BEEN FEATURED ON SEVERAL BULLETIN COVERS, MOST recently in the Spring/Summer issue of 1997.

According to Mrs. D'Isa, “Sentimental Journey” was painted at the request of her friend Pam Marmagin as a surprise gift for her husband Jim. During World War II, Jim served in the 137th Regiment and received a Purple Heart for his service. From his belongings, Pam provided the army jacket, helmet, and other military items shown.

This painting has been exhibited in many shows, including the Ohio Watercolor Society State Show in Canton, Ohio; the YWCA Women's Art Show; and at the Butler Institute of American Art.



Mary Kay Buckley D'Isa

both universities.

Mrs. D'Isa is a charter member of the Mahoning Valley Watercolor Society, was elected into the Pittsburgh Watercolor Society, and holds signature membership in the Ohio Watercolor Society. She also holds memberships in the Salem Art Guild and the Valley Art Guild.

This talented artist has exhibited statewide, regionally, and nationally, and has won numerous awards. Her paintings have been selected at juried shows, including the national Mid-Year Shows at the Butler Institute of American Art, Pittsburgh Aqueous National Shows, and Ohio Watercolor Society Annuals. Her watercolors are represented in several public and private collections, including the Butler Institute of Ameri-

can Art, St. Elizabeth's Health Center, Forum Health Center, Trumbull Memorial Hospital, Meridia South Hospital, and Westminster College.

Among other accomplishments, Mrs. D'Isa was elected the YWCA's 1982 *Woman of the Year* in the Career Arts Category. In 1997 she was selected as the Steel Valley Art Teachers Association's *Outstanding Art Educator*. Recently, one of her paintings “Gift from the Five” was selected for limited edition prints, the proceeds of which will benefit the Beatitude House of Youngstown.

Since her last appearance in this publication, Mrs. D'Isa has had several noteworthy honors. The following is a partial list of her recent accomplishments:

- Won 2nd place (Professional Division Painting) in the Mill Creek Park Anniversary Art Show (October 1997)
- Won an award for watercolor painting in the 61st Area Artists' Annual Show held at the Butler Institute of American Art (November 1997) The juror was M. Joseph Albacete, executive director of the Canton Museum of Art.
- Tied (with Sis Soller) for first place popular vote for watercolors featuring a Victorian theme at the Youngstown Playhouse Show (March-April 1998)
- Received an award in the YWCA Women's Art Show (May 1998) The juror was Peggy Lynn Cox, chairperson of the Art Department at Westminster College.
- Her watercolor “McGuire's Place” was accepted in the Pittsburgh Watercolor Society's 52nd Annual Aqueous Exhibition to be featured at LaFond Gallery in Pittsburgh (August-September 1998) The juror was Pat Deadman, AWS, NWS.
- Served as a judge for the Junior League of Youngstown Photo Contest. Winning photographs will appear in the 1999 edition of the “This is the Mahoning Valley” calendar.



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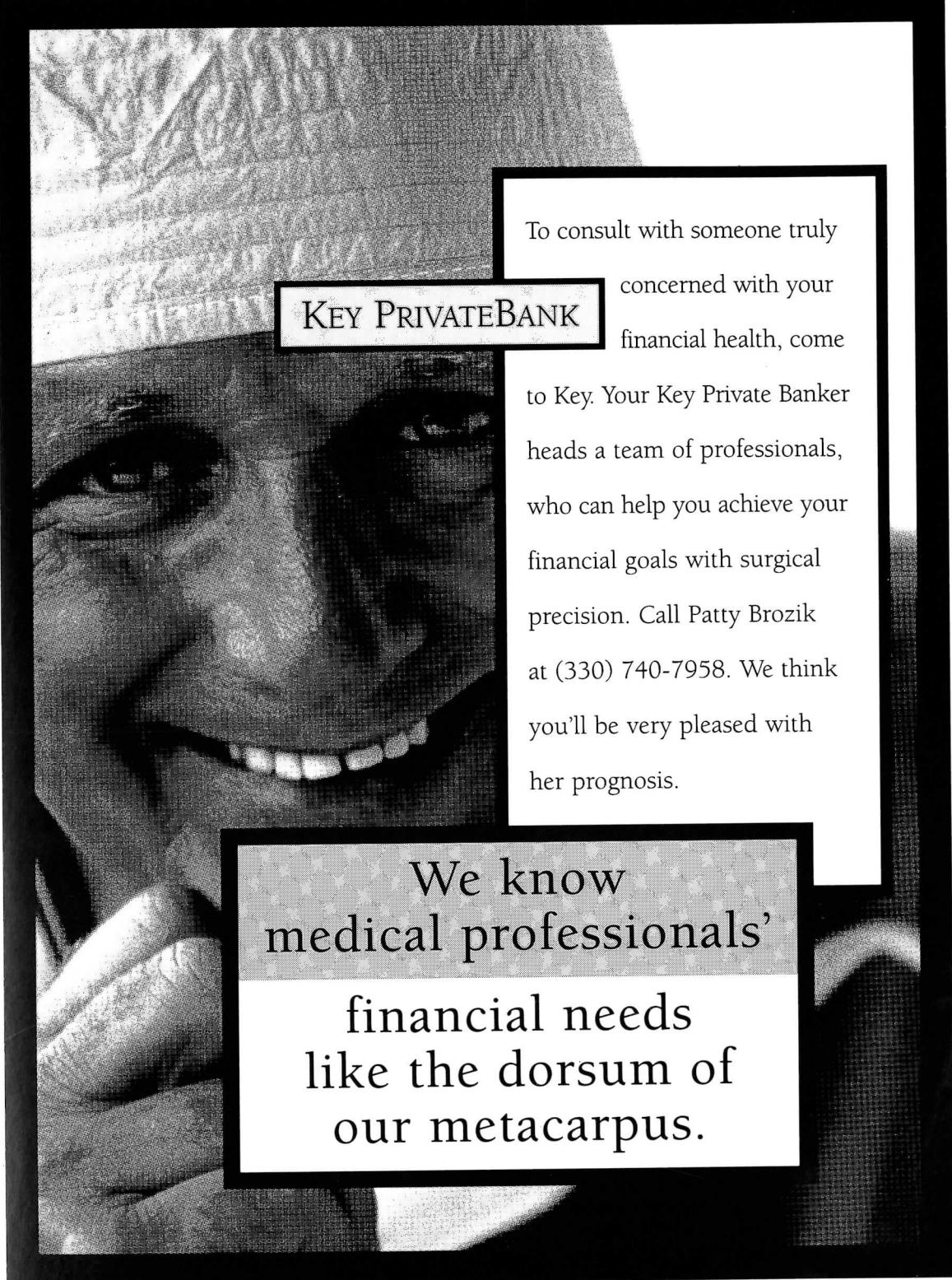
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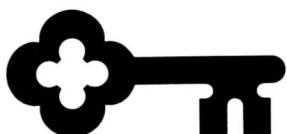
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Forum Health Physician Leader Receives Award Posthumously

JUST A FEW WEEKS AFTER HIS DEATH, BRUCE LIPTON, MD, OF GIRARD, FORMER PRESIDENT OF THE WESTERN RESERVE CARE SYSTEM Professional Staff has received a prestigious award, posthumously. Dr. Lipton is the 1998 recipient of the "Henry Holden, MD Medical Leadership Award". Accepting the honor on behalf of her late husband was Paula Lipton.



Lawrence M. Pass, MD, Forum Health Cancer Carecenter and Paula Lipton, wife of the late Dr. Bruce Lipton.

The second annual award is given in recognition of Dr. Lipton's excellence in physician leadership and service to the community. The recipient is chosen by the Professional Staff of Western Reserve Care System, Forum Health. Dr. Lipton, an internal medicine specialist, came to Youngstown in 1969. He was very active in Forum Health committees, serving as president of the WRCS Professional Staff, chairman of the Professional Executive Committee, and vice chairman of the Department of Internal Medicine, as well as serving as a member of the Forum Health and Western Reserve Care System Boards of Trustees.

In awarding the plaque to Mrs. Lipton, Henry Holden, MD, noted that Dr. Lipton was an excellent teacher and physician and was an exemplary advocate for patients and their families, as well as the organization. The first recipient of the award in 1997 was Henry Holden, MD, for whom the recognition is now named.

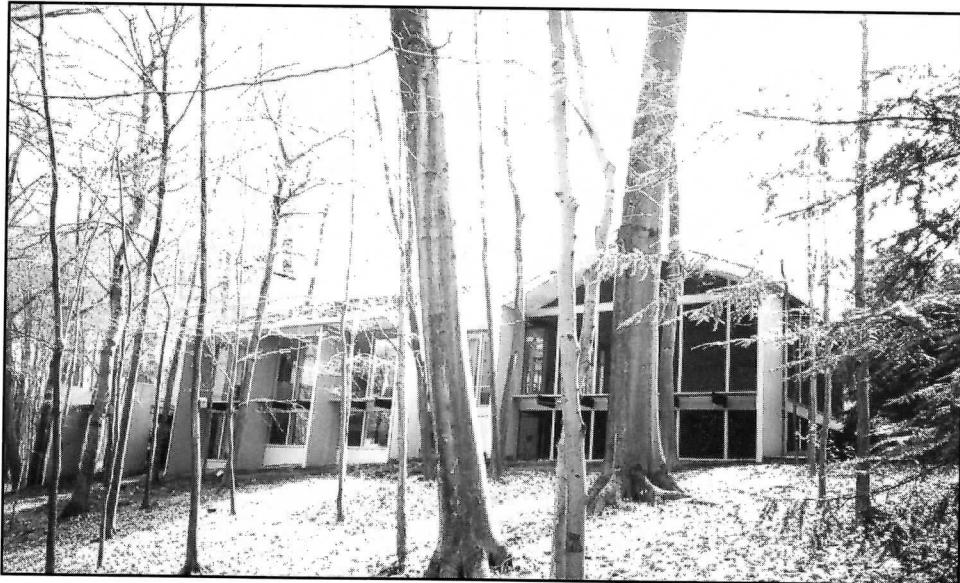
President's Page

continued from pg. 4

These are just a few of the many alternative remedies patients are hearing about. This does not include homeopathy, magnet therapy, acupuncture, acupressure, and hypnotherapy. Patients are willing to pay out of pocket for these remedies. In this day and age when everyone from the pharmacist to the herbalist has an opin-

ion on what our patients should be taking, physicians more than ever need to be aware and on the lookout for possible medication interactions. And remember what I tell my patients—"LSD mushrooms are natural, but would you eat them?!"

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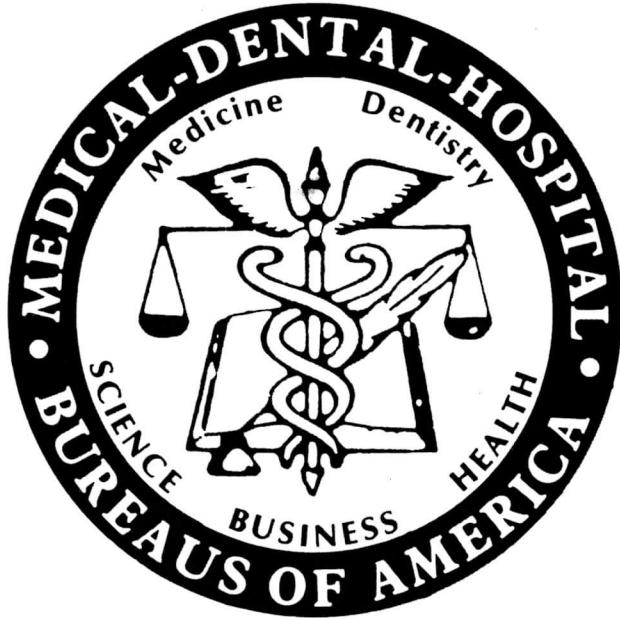
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